Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information universit displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

Practitioners associated with the Customer Number:	I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).									
Precitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~									
Precitioner(s) nemed below (if more than ten patent pracellifoners are to be nemed, then a customore number must be used): Name Registration Number Name Registration Number Numb	Pract	itioners associated with the Custon	ner Number:		66170					
es altorrey(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with eny and all patent applications assigned only to the undersigned according to the USPTO assignment reports or assignment decoments attended to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the ettached statement under 37 CFR 3.73(b) for OR The address associated with Customer Number: Firm or Individual Name Address Assignee Name and Address	OR									
as attemey(s) or agent(s) to represent the undersigned before the United States Paters and Trademark Office (USPTO) in connection with any end all patent applications assigned only to the undersigned according to the USPTO assignment reports or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondance address for the application identified in the ettached statement under 37 CFR 3.73(b) for. The address associated with Customer Number: 66170 OR Firm or Individual Name Address City State City State City State City State City State City State Assignee Name and Address: American Express Travel Related Services Company, Inc. 200 Vessy Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee. Signature Signature of Absignee of Record The instinational wices signature and title is supplied below is authorized to act on behalf of the assignee. Signature Maxine Y. Graham Telephone (212) 640-1219	Practitioner(s) named below (if more than lan patent practitioners are to be named, then a customer number must be used):									
as altomey(s) or agont(s) to represent the undersigned before the United States Patent and Trademark Office (USFTO) in connection with any end all patent applications assigned only to the undersigned according to the USPTO assignment reports or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) for The address associated with Customer Number: Firm cr		Neme				Name	6.			
any and all paint applications assigned only to the undersigned according to the USPTO assignment reports or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) for the address associated with Customer Number: OR The address associated with Customer Number: Gity City State Zip Country Telephone Email Assigned Name and Address. American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. Signature of Assignee of Record The institutional whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Maxing Y. Graham Telephone (212) 640-1219		***************************************		2:1001	***************************************	******************************	***************************************			
any and all paint applications assigned only to the undersigned according to the USPTO assignment reports or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) for the address associated with Customer Number: OR The address associated with Customer Number: Gity City State Zip Country Telephone Email Assigned Name and Address. American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. Signature of Assignee of Record The institutional whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Maxing Y. Graham Telephone (212) 640-1219	-	***************************************	*******************************			······································	······································			
any and all paint applications assigned only to the undersigned according to the USPTO assignment reports or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) for the address associated with Customer Number: OR The address associated with Customer Number: Gity City State Zip Country Telephone Email Assigned Name and Address. American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. Signature of Assignee of Record The institutional whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Maxing Y. Graham Telephone (212) 640-1219										
any and all paint applications assigned only to the undersigned according to the USPTO assignment reports or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) for the address associated with Customer Number: OR The address associated with Customer Number: Gity City State Zip Country Telephone Email Assigned Name and Address. American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. Signature of Assignee of Record The institutional whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Maxing Y. Graham Telephone (212) 640-1219	-						***************************************			
any and all paint applications assigned only to the undersigned according to the USPTO assignment reports or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) for the address associated with Customer Number: OR The address associated with Customer Number: Gity City State Zip Country Telephone Email Assigned Name and Address. American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. Signature of Assignee of Record The institutional whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Maxing Y. Graham Telephone (212) 640-1219						unusuaansnaanaahrekekee				
Please shange the correspondence with 37 CFR 3.73(b). Please shange the correspondence address for the application identified in the ettached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: 66170	es attorney(s) or agent(s) to represent the undersigned before the United States Paters and Trademark Office (USPTO) in connection with									
Please shange the correspondence address for the application identified in the ettached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: 66170	any and all patent applications assigned <u>only</u> to the undersigned according to the USPTO assignment records or assignment decaments attached to this form in accordance with 37 CFR 3.73(b).									
The address associated with Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Email Assignee Name and Address: American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. Signature of Assignee of Record The instindual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Maxine Maxine Y. Graham Telephone (212) 640-1219										
Firm cr Individual Name Address	And the state of t									
Firm cr Individual Name Address	V	ra address accordated with Paster	ser Novemen		66170					
Address City Country Telephone Email Assigned Name and Address: American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Maxing Y. Graham Telephone (212) 640-1219										
City State Zip Country Telephone Email Assignee Name and Address: American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Signature Maxing Y. Graham Telephone (212) 640-1219	Figm or									
Assignee Name and Address: American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the misignee. Signature Waxing Y. Graham Telephone (212) 840-1219	to in the second contract of the second contr									
Assignee Name and Address: American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the misignee. Signature Waxing Y. Graham Telephone (212) 840-1219		3 25								
Assignee Name and Address: American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Oate 10/10/05 Name (Maxing Y. Graham Telephone (212) 640-1219				Oleke .			6.50			
Assigned Name and Address: American Express Travel Related Services Company, Inc. 200 Vessey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Signature Maxine Y. Graham Telephone (212) 640-1219	Country									
American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature VIACCOCC Maxine Y. Graham Telephone (212) 640-1219	Telephone	ephane Email								
American Express Travel Related Services Company, Inc. 200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature VIACCOCC Maxine Y. Graham Telephone (212) 640-1219	A									
200 Vesey Street (c/o General Counsel's Office, World Financial Center) New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The instinctual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Vivior Maxine Y. Graham Telephone (212) 640-1219										
New York, NY 10285-4900 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The instindual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature VIVIOR Maxine Y. Graham Telephone (212) 640-1219										
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Signature VIVIOR Maxine Y. Graham Telephone (212) 640-1219										
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee. Signature Signature VIVIOR Maxine Y. Graham Telephone (212) 640-1219										
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Signature VIVILIAN Maxine Y. Graham Telephone (212) 640-1219	A copy of this form, together with a statement under 37 GFR 3.73(b) (Form PTU/58/9) of equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of									
SIGNATURE of Assignee of Repord The instinutual whose signature and title is supplied below is authorized to not on behalf of the wisignee Signature V/V/V/AQ (A/V/AQ) Name Maxing Y. Graham Telephone (212) 640-1219	the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee.									
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Signature V/V/X/C										
Name Maxine Y. Graham Telephone (212) 840-1219										
Name Maxine Y. Graham Telephone (212) 840-1219	Signature	- Yilliame d	Wal	G _k zy	······································	Da	: 12/u/k			
Title V.P. Chief IP Counsel	Name						lephone (212	640-1219		
	Title	V.P. Chief IP Counsel								

I'ms conection or mormation is required by 37 Gr N 1.31. 1.52 and 1.35. The importance is required to clear or refer a benefit by the public which is no set and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This consultance is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patern and Trademark Office, U.S. Department of Commence, P.C. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.

Privacy Act Statement

The Privacy Act of 1974 (P.L. 93-579) requires that you be given certain information in connection with your submission of the attached form related to a patent application or patent. Accordingly, pursuant to the requirements of the Act, please be advised that: (1) the general authority for the collection of this information is 35 U.S.C. 2(b)(2); (2) furnishing of the information solicited is voluntary; and (3) the principal purpose for which the information is used by the U.S. Patent and Trademark. Office is to process and/or examine your submission related to a patent application or patent. If you do not furnish the requested information, the U.S. Patent and Trademark Office may not be able to process and/or examine your submission, which may result in termination of proceedings or abandonment of the application or expiration of the patent.

The information provided by you in this form will be subject to the following routine uses:

- 1. The information on this form will be treated confidentially to the extent allowed under the Freedom of Information Act (5 U.S.C. 552) and the Privacy Act (5 U.S.C 552a). Records from this system of records may be disclosed to the Department of Justice to determine whether disclosure of these records is required by the Freedom of Information Act.
- A record from this system of records may be disclosed, as a routine use, in the course of
 presenting evidence to a court, magistrate, or administrative tribunal, including disclosures to
 apposing counsel in the course of settlement negotilations.
- A record in this system of records may be disclosed, as a routine use, to a Member of
 Congress submitting a request involving an individual, to whom the record partains, when the
 individual has requested assistance from the Member with respect to the subject matter of the
 record.
- 4. A record in this system of records may be disclosed, as a routine use, to a contractor of the Agency having need for the information in order to perform a contract. Recipients of information shall be required to comply with the requirements of the Privacy Act of 1974, as amended, pursuant to 5 U.S.C. 552a(m).
- A record related to an International Application filed under the Patent Cooperation Treaty in this system of records may be disclosed, as a routine use, to the International Bureau of the World Intellectual Property Organization, pursuant to the Patent Cooperation Treaty.
- A record in this system of records may be disclosed, as a routine use, to another federal agency for purposes of National Security review (36 U.S.C. 181) and for review pursuant to the Atomic Energy Act (42 U.S.C. 218(c)).
- 7. A record from this system of records may be disclosed, as a routine use, to the Administrator. General Services, or his/her designee, during an inspection of records conducted by GSA as part of that agency's responsibility to recommend improvements in records management practices and programs, under authority of 44 U.S.C. 2904 and 2906. Such disclosure shall be made in accordance with the GSA regulations governing inspection of records for this purpose, and any other relevant (i.e., GSA or Commerce) directive. Such disclosure shall not be used to make determinations about individuals.
- 8. A record from this system of records may be disclosed, as a routine use, to the public after either publication of the application pursuant to 35 U.S.C. 122(b) or issuance of a patent pursuant to 35 U.S.C. 151. Further, a record may be disclosed, subject to the limitations of 37 CFR 1.14, as a routine use, to the public if the record was filed in an application which became abendoned or in which the proceedings were terminated and which application is referenced by either a published application, an application open to public inspection or an issued patent.
- A record from this system of records may be disclosed, as a routine use, to a Federat State, or local law enforcement agency, if the USPTO becomes aware of a violation or potential violation of law or regulation.